
STATEMENT FOR THE RECORD

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BEFORE THE

UNITED STATES SENATE
COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS

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NOMINATION HEARING

Good morning Mr. Chairman, Ranking Member Collins and distinguished Members of the Committee. It is my privilege to appear before the Committee today as the President's nominee to become the first Assistant Secretary for Health Affairs and Chief Medical Officer of the Department of Homeland Security. I want to thank my friend Senator Burr for his warm introduction. I also want to thank President Bush and Secretary Michael Chertoff for this opportunity.

Our Nation has always faced threats to its citizens, be they natural events or acts of aggression by individuals, groups or foreign states. But the events of the last six years within our homeland have spurred many people like me to action, who might otherwise have been content to stay comfortably in a profession in the private sector. I have been fortunate to be part of our young Department's start up and maturation, to witness real leadership and singleness of purpose first hand, and to learn from weathering the storms of a challenging merger and creation of a new culture. I have gained tremendously from having been given the chance to start up a new organization that is so vital to the security of our Nation, and if confirmed, look forward to finishing the task I started 27 months ago.

As part of the Secretary's second stage review of the Department of Homeland Security (DHS) in 2005, I was appointed to be the Department's first Chief Medical Officer, and have served in that capacity since September, 2005. Congress codified the Office of the Chief Medical Officer and responsibilities of the Chief Medical Officer in the Homeland Security Act in October 2006. The responsibilities of the Chief Medical Officer ensure that the Secretary and the FEMA Administrator receive the best possible advice on public health and medical issues in real-time, in preparation for, during, and while recovering from an event. In standing up the office, I have focused on these primary areas:

- Serving as the Department's principal health and medical authority in both a policy and operational capacity;
- Leading the Department's biodefense activities, including policy, strategy, program operations, requirements, and metrics;
- Developing a coordinated national biodefense architecture for WMD planning and catastrophic consequence management; and
- Ensuring that the Department's employees are supported by an effective Occupational Health and Workforce Protection program.

Having worked in the fields of emergency medicine, public health and safety policy throughout my entire career, I have the knowledge and experience to make strong contributions to our young Department and provide the leadership necessary to help protect the security of the homeland. If confirmed, I will continue to work diligently to meet the goals for the Office of Health Affairs.

By way of history, I am a native North Carolinian, where I was a physician, educator, and researcher in emergency medicine. I have spent my life in the field of trauma care and injury prevention, starting as an EMT while in college at the University of the South in 1974, through medical school at the Medical University of South Carolina, and residency in emergency medicine in Charlotte. I practiced and taught emergency medicine at Carolinas Medical Center in Charlotte for 17 years and founded the Carolinas Center for Injury Prevention and Control, driving local and regional programs in prevention, incident management, and response by integrating data from emergency medical care, public safety, and transportation. I had the opportunity to participate actively in the political process by working with local and State officials and the North Carolina General Assembly on many pieces of safety policy and legislation. I regard my experience in injury control at the local, State, and National levels as

practicing applied public health, with the opportunity to positively affect thousands of lives with my work, rather than one at a time as I did in my medical practice.

My service to the Nation from inside the Federal Government began in 2001, when President Bush nominated me to be the 12th Administrator of the National Highway Traffic Safety Administration (NHTSA). I was confirmed by the Senate in August, 2001, and served in that capacity until 2005, having the responsibility for improving safety of our Nation's roadways and regulating the automotive industry. That experience enabled me to respond when Secretary Chertoff asked me to help him address another potential massive public health problem -- the aftermath of an act of terrorism by chemical, biological, or radio-nuclear weapons, and the vulnerability of our Nation's food and water.

I am very proud of my record at NHTSA, where I focused on five priorities: increasing safety belt use, reducing impaired driving, reducing rollover deaths and injuries, improving the crash compatibility of cars and light trucks, and improving NHTSA's data systems. The success we enjoyed was due largely to work done at the local level – by the cop on the beat, the EMS professionals in the street, and the advocate community – supported by science-based programs developed at the National level. By working through a robust NHTSA regional system with communities and private sector partners, we were able to achieve a National safety belt use rate of 82%, the first absolute decrease in highway deaths in a nearly a decade, the largest decrease in the number of alcohol-related fatalities since 1992, stimulating the redesign of SUV's to lower rollover risk, and driving child traffic fatalities to historic lows.

This same approach of using the expertise at the community level to implement science-based interventions is also the key to preparedness for catastrophic incidents. Congress authorized the Chief Medical Officer to serve as the Department's primary point of contact to the

public and the private sector on all medical and public health matters. As our small office grows into one that can fulfill our obligations, my intention is to enable the Office of Health Affairs to achieve a similarly robust regional presence so that we may use the assets of all of DHS, including the FEMA regional professionals, along with the regional resources of the Department of Health and Human Services (HHS), to assure a better state of local preparedness, fully integrating health preparedness among all the sectors. The status of our National preparedness depends heavily upon the status of local readiness, which in turn depends upon unified principals, planning, equipping, training and exercising across various sectors.

The authorizing legislation, P.L. 109-295 (The Post Katrina Emergency Management Reform Act), provided that the Chief Medical Officer serve at the assistant secretary level, be nominated by the President, and confirmed by the Senate. It also reorganized the Department to make FEMA a larger and more robust organization. The Secretary, like Congress, recognized the importance of the Chief Medical Officer's position, used his authority to create the Office of Health Affairs (OHA) to consolidate the Department's biodefense responsibilities, including program operations, planning and incident management for biological events, and to ensure that the Department had policies, programs and metrics in place to protect its workforce through occupation safety and health and tactical medical support. The intent was to create an office with Department-wide and cross-cutting responsibilities. This massive mission was undertaken with a token budget and a very small but very dedicated and tireless staff, deeply devoted to the cause of the health preparedness of the Nation. The OHA began officially on March 31, 2007, and in late June we received permission to reprogram funds to allow us to begin hiring the necessary personnel and securing space and infrastructure support. We are hopeful that we will receive the President's full request in FY 2008, which will allow us to begin to fill the many gaps

that exist in our Nation's biodefense and our service to the Department's components and employees.

Since the reprogramming, we have made significant strides in assembling a deeply talented and dynamic group of public servants, many of whom came out of the private sector into government for lower financial compensation, simply because they understand the urgency of our mission and want to apply their expertise to it. We have been successful in attracting some of the top leaders in their fields, including physicians trained in emergency medicine, EMS, trauma care and occupational health and safety; veterinarians specializing in animal public health and biological threats; PhDs trained in biosurveillance and chemical and biological defense; and professionals with policy and legal expertise. We have attracted some of the Department's best up and coming administrative and management professionals to assure that we have the infrastructure in place to support our program experts. It is my top priority to build a top-notch career workforce that will be here to help protect our Nation with or without political leadership, during times of transition and beyond.

By the end of my tenure, I intend to leave my successor with a well-defined mission, strategic plan, and a budget to support it. I intend to leave behind a fully functioning National Biosurveillance Integration Center (NBIC), a robust Office of Food, Agriculture and Veterinary Defense, and an improved BioWatch early warning program. I intend to leave behind strategic plans to counter and mitigate biological, chemical and radio-nuclear attacks, informing guidance for coordinated health preparedness grants, and the capability of fully supporting the Secretary and the FEMA Administrator during an event of any magnitude. I intend to leave with the assurance that our components are supported with health and safety policies, standards and

metrics for the protection of our workforce and with access to support and advice on all health and medical matters.

Chairman Lieberman and Ranking Member Collins, I would like to thank you again for considering my nomination. Your continued investment in the Office of Health Affairs is critical. I look forward to working with you and your staff on the many issues threatening our Nation's homeland security. It has been a true honor to come to work every day to serve and protect the homeland security of the Nation. Standing up this capability for the Secretary and the country has been one of the greatest challenges of my professional life, and I believe we are headed in the right direction and making tangible progress in our efforts to be better prepared for the threats that America faces. Thank you.

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